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CONFIRMATION NO. 9139

<b>SERIAL NUMBER</b> 09/855,403	<b>FILING OR 371(c) DATE</b> 05/15/2001 <b>RULE</b>	<b>CLASS</b> 128	<b>GROUP ART UNIT</b> 3731	<b>ATTORNEY DOCKET NO.</b> A1669cip
<b>APPLICANTS</b> Robert Johnson, Yucca Valley, CA; Robert DuBose, Oakland, OR;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/610,801 07/06/2000 PAT 6,363,932 <span style="float: right;">60</span> <b>** FOREIGN APPLICATIONS *****</b> <span style="margin-left: 150px;">none 00</span>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 07/11/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <span style="margin-left: 50px;">Allowance</span> Verified and Acknowledged <span style="margin-left: 50px;">Examiner's Signature</span> <span style="margin-left: 50px;">Initials</span>		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 24 <b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 33197				
<b>TITLE</b> Aerosol enhancement device				
<b>FILING FEE RECEIVED</b> 1084	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	